



Statewide Document Destruction, Shredding and Recycling Services

Part I - Technical Proposal

Request for Proposal #1978

Opening: May 31, 2012 2:00 P.M.

American Shredding, Inc
630 Spice Islands Drive, Suite D
Sparks, Nevada 89431
Phone (415) 601 4030

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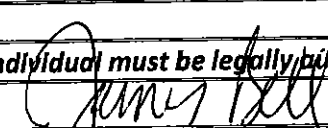
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Tab III

VENDOR INFORMATION SHEET FOR RFP 1978

Vendor Must:

- A) Provide all requested information in the space provided next to each numbered question. The information provided in Sections V1 through V6 will be used for development of the contract;
- B) Type or print responses; and
- C) Include this Vendor Information Sheet in Tab III, State Documents of the Technical Proposal.

V1	Firm Name	American Shredding, Inc.	
V2	Street Address	630 Spice Islands Drive, Suite D	
V3	City, State, ZIP	Sparks, NV 89431	
V4	Telephone Number		
	Area Code: 775	Number: 358-3000	Extension:
V5	Facsimile Number		
	Area Code: 775	Number: 358-3010	Extension:
V6	Toll Free Number		
	Area Code:	Number:	Extension:
V7	Contact Person for Questions / Contract Negotiations, including address if different than above		
	Name: James Bell		
	Title: Vice President, Business Development		
	Address: 630 Spice Island, Suite D, Sparks, Nevada 89139		
	Email Address: james@americanshredding.com		
V8	Telephone Number for Contact Person		
	Area Code: 415	Number: 601-4030	Extension:
V9	Facsimile Number for Contact Person		
	Area Code: 775	Number: 358-3010	Extension:
V10	Name of Individual Authorized to Bind the Organization		
	Name: James Bell		Title: VP Business Development
V11	Signature (Individual must be legally authorized to bind the vendor per NRS 333.337)		
	Signature: 		Date: 5/31/12

Tab IV – State Documents**ATTACHMENT A – CONFIDENTIALITY AND CERTIFICATION OF INDEMNIFICATION**

Submitted proposals, which are marked "confidential" in their entirety, or those in which a significant portion of the submitted proposal is marked "confidential" will not be accepted by the State of Nevada. Pursuant to NRS 333.333, only specific parts of the proposal may be labeled a "trade secret" as defined in NRS 600A.030(5). All proposals are confidential until the contract is awarded; at which time, both successful and unsuccessful vendors' technical and cost proposals become public information.

In accordance with the Submittal Instructions of this RFP, vendors are requested to submit confidential information in separate binders marked "**Part I B Confidential Technical**" and "**Part III Confidential Financial**".

The State will not be responsible for any information contained within the proposal. Should vendors not comply with the labeling and packing requirements, proposals will be released as submitted. In the event a governing board acts as the final authority, there may be public discussion regarding the submitted proposals that will be in an open meeting format, the proposals will remain confidential.

By signing below, I understand it is my responsibility as the vendor to act in protection of the labeled information and agree to defend and indemnify the State of Nevada for honoring such designation. I duly realize failure to so act will constitute a complete waiver and all submitted information will become public information; additionally, failure to label any information that is released by the State shall constitute a complete waiver of any and all claims for damages caused by the release of the information.

This proposal contains Confidential Information, Trade Secrets and/or Proprietary Information as defined in **Section 2 "ACRONYMS/DEFINITIONS."**

Please initial the appropriate response in the boxes below and provide the justification for confidential status.

Part I B – Confidential Technical Information			
YES		NO	X No
Justification for Confidential Status			

A Public Records CD has been Included for the Technical and Cost Proposal			
YES	X Yes	NO	

Part III – Confidential Financial Information			
YES		NO	
Justification for Confidential Status			

American Shredding, Inc.

Company Name

Signature

James Bell

Print Name

5/31/2012

Date

ATTACHMENT C – VENDOR CERTIFICATIONS

Vendor agrees and will comply with the following:

- (1) Any and all prices that may be charged under the terms of the contract do not and will not violate any existing federal, State or municipal laws or regulations concerning discrimination and/or price fixing. The vendor agrees to indemnify, exonerate and hold the State harmless from liability for any such violation now and throughout the term of the contract.
- (2) All proposed capabilities can be demonstrated by the vendor.
- (3) The price(s) and amount of this proposal have been arrived at independently and without consultation, communication, agreement or disclosure with or to any other contractor, vendor or potential vendor.
- (4) All proposal terms, including prices, will remain in effect for a minimum of 180 days after the proposal due date. In the case of the awarded vendor, all proposal terms, including prices, will remain in effect throughout the contract negotiation process.
- (5) No attempt has been made at any time to induce any firm or person to refrain from proposing or to submit a proposal higher than this proposal, or to submit any intentionally high or noncompetitive proposal. All proposals must be made in good faith and without collusion.
- (6) All conditions and provisions of this RFP are deemed to be accepted by the vendor and incorporated by reference in the proposal, except such conditions and provisions that the vendor expressly excludes in the proposal. Any exclusion must be in writing and included in the proposal at the time of submission.
- (7) Each vendor must disclose any existing or potential conflict of interest relative to the performance of the contractual services resulting from this RFP. Any such relationship that might be perceived or represented as a conflict should be disclosed. By submitting a proposal in response to this RFP, vendors affirm that they have not given, nor intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant or any employee or representative of same, in connection with this procurement. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of a vendor's proposal. An award will not be made where a conflict of interest exists. The State will determine whether a conflict of interest exists and whether it may reflect negatively on the State's selection of a vendor. The State reserves the right to disqualify any vendor on the grounds of actual or apparent conflict of interest.
- (8) All employees assigned to the project are authorized to work in this country.
- (9) The company has a written equal opportunity policy that does not discriminate in employment practices with regard to race, color, national origin, physical condition, creed, religion, age, sex, marital status, sexual orientation, developmental disability or handicap.
- (10) The company has a written policy regarding compliance for maintaining a drug-free workplace.
- (11) Vendor understands and acknowledges that the representations within their proposal are material and important, and will be relied on by the State in evaluation of the proposal. Any vendor misrepresentations shall be treated as fraudulent concealment from the State of the true facts relating to the proposal.
- (12) Vendor must certify that any and all subcontractors comply with Sections 7, 8, 9, and 10, above.
- (13) The proposal must be signed by the individual(s) legally authorized to bind the vendor per NRS 333.337.

American Shredding, Inc.

Vendor Company Name

Vendor Signature

James Bell

Print Name

5/31/2012

Date



CERTIFICATE OF LIABILITY INSURANCE

OP ID: RS

DATE (MM/DD/YYYY)

01/06/12

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER R. T. Beers & Co. Ins. Services 111 West Ocean Blvd. #1500 Long Beach, CA 90802-4853 Carol Angle		562-901-4800 562-901-4801	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: AMERI-7
INSURED American Shredding, Inc. 336 Adeline Street Oakland, CA 94607		INSURER(S) AFFORDING COVERAGE INSURER A: Granite State Insurance Co. INSURER B: New Hampshire Insurance Co. INSURER C: Hartford Fire Insurance Co. INSURER D: Everest National Insurance Co. INSURER E: Princeton Ex. & Surp Lines Ins INSURER F:	
		NAIC # 23841 19682	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY		02LX62641744	12/09/11	12/09/12	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 10,000
						PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					PRODUCTS - COM/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY		01CA93485364 \$10,000 DEDUCTIBLE	12/09/11	12/09/12	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS					\$
	<input type="checkbox"/> NON-OWNED AUTOS					\$
E	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		66A3UB000119700	12/09/11	12/09/12	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		CA10001010111	12/15/11	12/15/12	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/>				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Business Service		72BSBDX0890	01/20/11	01/20/12	Limit 100,000
	Bond					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

PROFESSIONAL LIABILITY COVERAGE - Company: Continental Casualty Company;

Policy #287024056; Policy Term: 04/21/11 - 04/21/13; Limit: \$1,000,000;

Deductible: \$5,000. OTHER UMBRELLA POLICY - Carrier: Fireman's Fund;

Limit: \$20 mil per occurrence/Aggregate; Policy Term: 12/09/11 - 12/09/12;

Policy #SHX00048567531. (SEE ATTACHED NOTEPAD)

CERTIFICATE HOLDER**CANCELLATION****PROOF-1**

PROOF OF COVERAGE

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Ruth Solomon

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NOTEPAD:

HOLDER CODE PROOF-1
INSURED'S NAME American Shredding, Inc.

AMERI-7
OP ID: RS

PAGE 2
DATE 01/06/12

LOCATIONS:

5185 West Harold Gatty Dr, SLC, UT 84116
2313 Mendenhall Drive, North Las Vegas, NV 89081
1221 Third Street, Oakland, CA 94607
405 North 75th Ave, Suite 106 Phoenix AZ 85043
1248 Alameda Street, Wilmington CA 90744
630 Spice Islands Drive, Suite D Sparks NV 89431
2441 W Commerce Street Dallas TX 75212
8291 Springdale Road, Suite 400 Austin TX 78724



SUBJECT: Amendment No. 1 to Request for Proposal No. 1978
DATE OF AMENDMENT: May 21, 2012
DATE OF RFP RELEASE: April 26, 2012
DATE AND TIME OF OPENING: May 31, 2012 @ 2:00 pm
AGENCY CONTACT: Teri Smith, Procurement Staff Member

The following shall be a part of RFP No. 1978 for **Statewide Document Destruction, Shredding & Recycling Services**. If a vendor has already returned a proposal and any of the information provided below changes that proposal, please submit the changes along with this amendment. You need not re-submit an entire proposal prior to the opening date and time.

1. Our company is a Disabled Veteran Business Enterprise, (a) is there going to be a consideration made for DVBE status in the bid process and, (b) where is the additional form(s) that should accompany the bid that shows our DVBE status?

NRS 333.3361 to 333.3369, inclusive, is a preference for bid or proposal submitted by local business owned by veteran with service-connected disability and applies only to Invitations to Bid.

2. Is there a list of those locations that will fall within the "rural" areas of Nevada for the purposes of the bid? We will need to understand those locations in order to effectively be able to determine our ability to service them.

There is currently no "list" of locations. Primary locations include Carson City, Reno, and Las Vegas. Secondary locations include Elko, Ely, Winnemucca and possible additional locations as needed.

3. Will all locations be serviced under this contract? The RFP states that this will be mandatory for State Agencies, does this mean the awarded vendor will service all agencies that need shredding or will each agency still be able to choose a vendor as long as they have a state contract?

Should the State determine to award multiple contracts, agencies will have the option to choose a contracted vendor or a Community Training Center.

4. Is there a current list of agencies that are using shredding services?

There is no current listing of using agencies.

5. Is there a list of the # of containers at each location?

There is no current listing of the number of containers at each location.

6. Is there a list of the frequency of service, if any, of service at each location?

There is no list of the frequency of service, if any, at each location.

7. Is there an estimate of the volume for last year for both Northern and Southern Nevada shredding needs by either pounds, bins tipped, or boxes?

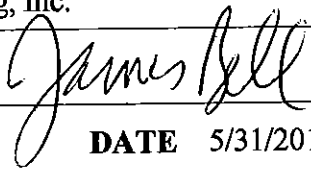
Estimated volumes for Northern Nevada for the last year is approximately 125,000 lbs.

Estimated volumes for Southern Nevada for the last year is approximately 50,000 lbs.

These estimates do not include Community Training Center amounts.

ALL ELSE REMAINS THE SAME FOR RFP 1978.

Vendor shall sign and return this amendment with proposal submitted.

NAME OF VENDOR	American Shredding, Inc.
AUTHORIZED SIGNATURE	James Bell 
TITLE	VP Business Development
	DATE 5/31/2012

RFP 1978 Amendment 1

This document must be submitted in the "State Documents" section/tab of vendors' technical proposal

Tab V

**ATTACHMENT B – TECHNICAL PROPOSAL CERTIFICATION OF COMPLIANCE
WITH TERMS AND CONDITIONS OF RFP**

I have read, understand and agree to comply with the terms and conditions specified in this Request for Proposal.

YES X I agree to comply with the terms and conditions specified in this RFP.

NO I do not agree to comply with the terms and conditions specified in this RFP.

In order for any exceptions and/or assumptions to be considered they **MUST** be documented in detail in the tables below. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission deadline. Vendors must be specific. Nonspecific exceptions or assumptions may not be considered. If the exception or assumption requires a change in the terms or wording of the contract, the scope of work, or any incorporated documents, vendors must provide the specific language that is being proposed in the tables below.

American Shredding, Inc.

Company Name James Bell
Signature

James Bell
Print Name

5/31/2012
Date

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

RFP SECTION NUMBER	RFP PAGE NUMBER	EXCEPTION (Complete detail regarding exceptions must be identified)

ASSUMPTION SUMMARY FORM

RFP SECTION NUMBER	RFP PAGE NUMBER	ASSUMPTION (Complete detail regarding assumptions must be identified)

Tab VI

Section 3 – Scope of Work

3.1

HIPAA: Requires compliance with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162, and 164, as amended. In the event that the functions or activities include the involvement of Protected Health Information, the awarded vendor agrees to enter into a Business Associate Agreement with the individual using agency which is under the HIPPA regulations as required by 45 C.F.R. 164.504 (e).

The State is seeking vendors who can provide onsite and offsite destruction and removal of documents statewide, with the capability of maintaining the security of confidential records as prescribed in the Nevada Administrative Code (NAC) 239.722 and 239.165 for local governments.

3.2

Method(s) of Destruction: Vendors must specify the method(s) of destruction/disposal their company can provide:

3.2.1

Recycling with a bonded/certified destruction service: The vendor picks up the paper from a central point at the facility and transports it to a bonded recycling facility. The vendor must provide a certificate of destruction that verifies when the paper was destroyed and when it was sent to the pulping mill.

American Shredding has its own secure facilities that have locking doors and a surveillance system to record all activity. The recorded events are kept a minimum of 90 days. All our trucks drive into the facility to unload and clean out all confidential material. All material is shredded, baled, and stored inside our secure facilities. We then transport baled material by the truckload to a pulping mill. We are a bonded, document destruction and recycling center. Yes, we will provide a Certificate of Destruction that verifies when the paper was destroyed and when it is transported to the pulping mill. We do not take the material we collect to a third party recycling center.

3.2.2

Shredding On-Site with mobile on-site shredding systems. The vendor picks up the paper from a central point at the facility and shreds it on-site in mobile units. The vendor must provide a certificate of destruction.

Yes we offer this service and we will comply.

3.2.3

Shredding off-site. The vendor picks up the paper from a central point at the facility and transports it to a bulk shredding facility. The vendor must provide a certificate of destruction that verifies when the paper was destroyed.

Yes we offer this service and we will comply.

3.3

Chain of Custody:

All vendors must acknowledge that they will be handling confidential information and must agree to maintain the confidentiality of the information. All records are to be disposed of in a confidential manner. Removal of records to the municipal dump is not permitted. The vendor must limit the use and disclosure of the materials to:

3.3.1

Not use or disclose the material in a manner that would violate any state, federal, or local law, including the HIPAA guidelines;

We agree and will comply.

3.3.2

Ensure that there are appropriate safeguards to prevent use or disclosure of the information;

We agree and will comply.

3.3.3

Immediately inform the State of any use or disclosure of the information that happens that they become aware of; and

We agree and will comply.

3.3.4

Ensure that any subcontractors (including trucking companies and paper mills) and employees are aware not to use or disclose the information.

We agree and will comply.

3.4

Time Frame: Vendors must identify the time that will elapse between acquisition and destruction/disposal of data/media.

We agree and will comply. For onsite destruction, the time will be a matter of minutes. For offsite destruction, it will be the same day as collection or not exceeding 24 hours time period depending upon client requirements.

3.5

Confidentiality Procedures: Vendors must provide procedures used to safeguard information against breaches in confidentiality, i.e.,:

We agree and will comply. We have satisfied all NAID requirements. All employees have signed a confidentiality agreement, passed a background check, passed a drug test(s), and have passed our training program detailing the proper conduct and protocols for safeguarding confidential material.

Taking Possession of Confidential Materials

Secure all containers and the content in them before moving the containers from their site of origin. No person, not even an employee of the client, is allowed to examine or retrieve materials once ASI has taken possession. There are NO exceptions to this ASI policy. If someone claims to have the right to look through the materials or retrieve a document, the ASI employee must contact the person who is managing the relationship with ASI. The material in dispute must be transported and left in the possession of the person who is managing the relationship with ASI. In the event this person is not available, the material in dispute must be left with the client's facility security office. The security officer who takes possession of the material must sign his name and provide all pertinent contact information on ASI's client ticket. The ASI employee involved in such an incident must immediately contact the ASI office or the ASI employee who manages the client.

Containers and material must be transported in a secure manner to the onsite mobile truck or transporting truck. If the material is being destroyed off-site, the driver must properly load containers and content onto the truck for transport back to ASI's facility. Once again, containers must be locked and properly transported in such a manner as to minimize moving and spilling of any contents during transport. The driver must stretch-wrap all pallets of boxed paper for off-site shredding. Once back at the ASI facility, the transporting truck must be taken inside the facility and properly unloaded. Content will be destroyed within 24 hours. During the destruction process, no one is allowed to examine or remove material. Anyone found to be reading, copying, or removing confidential material from ASI's facility will be fired immediately if an ASI employee and/or reported to the police. Additionally, anyone observed in such an action must be reported immediately. Additionally, if such an act is observed, the ASI on-site supervisor must immediately close and lock down the facility.

The "Nothing Leaves" Policy

As a security measure, employees may not take anything into or out of the destruction area without the permission of the Shift Supervisor or, in his absence, the Management Representative. This includes personal effects. ALL personal items must be left in the employee's locker, the ASI office, or the employee's personal vehicle. All ASI mail, newspapers, and miscellaneous paper that are generated at the ASI office will be shredded. This includes any piece of paper that has a name or address on it. No paper goes into the food-waste office receptacles. All ASI employees place all office-generated paper into the executive cabinets located throughout the ASI office.

All ASI employees demonstrate and maintain the highest level of internal security within our workplace so that our clients will feel comfortable with the services which we consistently provide to our own business, and to theirs. Our mission statement is to consistently demonstrate and build trust with our clients, and we maintain these strict and simple procedures to ensure awareness of our process and the total destruction of all confidential material. We do not throw away scraps or pieces

of paper generated in the office or the warehouse. All paper products must go into the shredder. If paper that has been shredded falls onto the floor, it is immediately placed on the conveyor belt. Non-compliance is justifiable grounds for termination of employment. THERE ARE NO EXCEPTIONS TO THESE ASI POLICIES.

3.5.1

Shred type and how the waste material is destroyed.

For on-site service, we use ShredFast pierce and tear patented technology to destroy material. For off-site service, we use Amerishred strip shredders and Shredfast pierce and tear patented technology for destruction of material.

3.5.2

Facility security and vehicle security.

Facility Features: One way locking swing doors. All doors lock. All open bays have scissor gates which lock if the door is left open. ADT alarm and sensor system. Film coating on windows. Fire sprinkler system. Eight Cameras that capture and record activity in the warehouse, and information of activity is kept a minimum of 90 days. Facility is large enough for all vehicles to drive into the warehouse, unload, and clean out all material. All material is baled and stored inside warehouse.

Onsite Vehicles: All doors lock and are kept locked at all times. Camera system to view the shredding of material.

Offsite Vehicles: All doors lock and are kept locked at all times.

Leaving the Truck Unattended: When a truck is left unattended while servicing an account or otherwise, all doors and hatches must be locked. Even if this requires multiple runs within a building, each time the truck is left unattended the truck MUST be 100% locked down. Once ASI takes custody of confidential material, all material is kept in a secure, locked container and safely locked inside the truck or secure holding area. No material is left unattended for any amount of time.

3.5.3

Methods used to prevent the escape of waste from vendors control (wind protection, baling precautions).

We only unlock containers at the time the material is to be destroyed. For on-site service, we leave the containers closed until they are dumped into the shredding system. Mobile trucks have sealed vinyl around the dumping container to prevent material from being blown away. We bale all material in a secure warehouse. All material which falls onto the floor is swept up and placed onto the conveyor. We do not have a regular trash service to prevent material from being thrown away. All paper material is shredded and baled. We conduct all activity inside our facility to eliminate weather conditions. For off-site service, we transport all containers locked. We lock down all containers during transport to prevent containers from moving around. We lock all doors upon closing a door. We train all employees on how to conduct themselves to reduce risk and exposure of material.

3.5.4

Who is authorized to handle the material, will they be bonded, insured; will you perform pre-employment background checks or random drug testing; what is your staff stability and turnover rates, etc.

All employees who are collecting, transporting, and/or shredding material have passed background checks and are drug free. All employees in the warehouse have passed background checks and are drug free. All employees are bonded and insured. We perform pre-employment background checks and random drug testing. We have a 15% turnover rate.

3.6

Geographic Region(s) and Hours of Availability: Identify service area (See Attachment I), hours of availability (i.e., standard work hours, emergency availability) and typical lead times necessary for scheduling pickups.

We service the Reno Metro Area and the Las Vegas Metro Area. Our normal hours of operation are from 7:00 A.M. until 5:00 P.M. Monday through Friday. We work on Saturdays and Sundays by pre-set appointments. We will work any day or hour with advance notice. We prefer to set up regular scheduled routine service. We like to have 24 hour notice to schedule an appointment. As the distance from Reno or Las Vegas increases to service a client, the more lead time will be required. I.e. Mesquite or Fallon are not regular service stops and thus require more lead time.

3.7

Quarterly Reporting: The awarded vendor(s) will provide quarterly reports of all document destruction, shredding and recycling services invoiced under this contract. Unless otherwise agreed, the "Quarterly Report for Document Destruction, Shredding and Recycling Services" (See Attachment K) must be used for all quarterly reports. Reports are to be submitted to the name and address listed on the form on or before the 15th of the month following the end of each state fiscal quarter.

We agree and will comply.

The State's quarters are:

<u>Quarter:</u>	<u>Quarterly Report Due:</u>
July 1 – September 30	October 15
October 1 – December 31	January 15
January 1 – March 31	April 15
April 1 – June 30	July 15

Failure to provide these quarterly reports in a timely manner may result in the assessment of one or more of the following penalties:

Contract suspension; and/or
Contract termination.

We agree and will comply.

3.8

NAID: Vendors should identify if they are certified with the National Association of Information Destruction, Inc. (NAID).

We are AAA certified by NAID in Las Vegas and Reno for both On-site and Off-site service.

3.9

Reimbursement Program: The State is interested in a recycled paper reimbursement program where the State is paid for shredded, recyclable paper. Vendors are to provide how their reimbursement will be calculated. Reimbursement checks shall be remitted to the Purchasing Division, payable to the State of Nevada for deposit into the general fund. Reimbursement checks will be submitted along with the "Quarterly Report for Document Destruction, Shredding and Recycling Services".

We agree and will comply.

Tab VII

Section 4 – Company Background and References

4.1

VENDOR INFORMATION

Vendors must provide a company profile in the table format below.

Question	Response
Company name:	<i>American Shredding, Inc.</i>
Ownership (sole proprietor, partnership, etc.):	<i>Corporation</i>
State of incorporation:	<i>California</i>
Date of incorporation:	<i>June 2005</i>
# of years in business:	<i>Seven (7)</i>
List of top officers:	<i>Steve Sutta – President</i> <i>James Bell – VP Business Development</i>
Location of company headquarters:	<i>Oakland, CA</i>
Location(s) of the company offices:	<i>Oakland, CA</i> <i>Wilmington, CA</i> <i>Phoenix, AZ</i> <i>Dallas, TX</i> <i>Austin, TX</i> <i>Sparks, NV</i> <i>Las Vegas, NV</i> <i>Salt Lake City, UT</i>
Location(s) of the office that will provide the services described in this RFP:	<i>2313 Mendenhall Drive</i> <i>North Las Vegas, NV 89081</i>

Question	Response
	630 Spice Islands Drive, Suite D Sparks, Nevada 89431
Number of employees locally with the expertise to support the requirements identified in this RFP:	25 Employees in Nevada
Number of employees nationally with the expertise to support the requirements in this RFP:	70 Employees Nationally
Location(s) from which employees will be assigned for this project:	Las Vegas and Sparks, Nevada

4.1.2

Please be advised, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state must register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.

4.1.3

The selected vendor, prior to doing business in the State of Nevada, must be appropriately licensed by the State of Nevada, Secretary of State's Office pursuant to NRS76. Information regarding the Nevada Business License can be located at <http://sos.state.nv.us>.

Question	Response
Nevada Business License Number:	NV20061579744
Legal Entity Name:	American Shredding, Inc.

Is "Legal Entity Name" the same name as vendor is doing business as?

Yes	Yes X	No	
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4.1.4

Vendors are cautioned that some services may contain licensing requirement(s). Vendors shall be proactive in verification of these requirements prior to proposal submittal. Proposals that do not contain the requisite licensure may be deemed non-responsive.

4.1.5

Has the vendor ever been engaged under contract by any State of Nevada agency?

Yes	Yes X	No	
-----	--------------	----	--

If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.

Question	Response
Name of State agency:	<i>Nevada State Contractors Board</i>
State agency contact name:	<i>Norma S Broyles</i>
Dates when services were performed:	<i>2009 to 2012</i>
Type of duties performed:	<i>Document Shredding</i>
Total dollar value of the contract:	<i>Ongoing- Value Unknown</i>

Question	Response
Name of State agency:	<i>Gaming Control Board</i>
State agency contact name:	<i>Mark in Reno 775-684-7726</i> <i>Stephanie in Las Vegas</i>
Dates when services were performed:	<i>2009 to 2012</i>
Type of duties performed:	<i>Document Shredding</i>
Total dollar value of the contract:	<i>Ongoing-Value Unknown</i>

Question	Response
Name of State agency:	<i>Public Utilities Commission</i>
State agency contact name:	<i>Donna in Carson City</i>
Dates when services were performed:	<i>2009 to 2012</i>
Type of duties performed:	<i>Document Shredding</i>
Total dollar value of the contract:	<i>Ongoing-Value Unknown</i>

Question	Response
Name of State agency:	<i>Bureau of Consumer Protection</i>
State agency contact name:	<i>Peggy or Lucille in Carson City</i>
Dates when services were performed:	<i>2009 to 2012</i>
Type of duties performed:	<i>Document Shredding</i>
Total dollar value of the contract:	<i>Ongoing-Value Unknown</i>

Question	Response
Name of State agency:	<i>Northern Nevada Correctional Center</i>
State agency contact name:	<i>Kathy in Carson City</i>
Dates when services were performed:	<i>2009 to 2012</i>
Type of duties performed:	<i>Document Shredding</i>
Total dollar value of the contract:	<i>Ongoing-Value Unknown</i>

Question	Response
Name of State agency:	State Board of Nursing
State agency contact name:	Dean Estes
Dates when services were performed:	2009 to 2012
Type of duties performed:	Document Shredding
Total dollar value of the contract:	Ongoing-Value Unknown

4.1.6

Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?

Yes		No	No X
-----	--	----	-------------

If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person will be performing or producing the services which you will be contracted to provide under this contract, you must disclose the identity of each such person in your response to this RFP, and specify the services that each person will be expected to perform.

We do not employ any former state employees.

4.1.7

Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP must also be disclosed.

Does any of the above apply to your company?

Yes		No	No X
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4.1.8

Company background/history and why vendor is qualified to provide the services described in this RFP. Limit response to no more than five (5) pages.

American Shredding, Inc., a privately held corporation, has been in the document destruction business since 1975 beginning with the creation of a secure facility in San Jose, CA. This facility was established specifically to handle the destruction material being purged by IBM. Document destruction in this era was a natural outgrowth of the recycling capabilities of The Sutta Company, which shares some of the owners and operating partners of American Shredding. One of the advantages of doing business with American Shredding is the sharing of inter-company financial resources, personnel, strategies, equipment and experience. The principals of American Shredding have over 100 years of experience providing document destruction services. Since our founding, not a single item slated for destruction has ever been compromised. We are a nimble, well financed, and customer driven company. It is the combination of size, experience, and ability that enables us to provide outstanding service and creative security solutions for our clients. We have set up and successfully serviced a client list that includes Fortune 500 companies.

The Sutta Company, headquartered in Oakland, CA is the second largest privately held recycling company in North America, processing over 35,000 tons of paper and plastic a month. The Sutta Company employs 125 people with a fleet of 90 various size vehicles. To learn more visit our website at www.sutta.com

In 2005, it was decided to expand into new markets and build a document destruction company on a regional level with partnerships for national solutions. We created a new name to reflect our new focus and American Shredding was born.

What makes us unique? We focus on custom solutions that center on security and customer service. We offer both on-site and off-site shredding solutions. Each one has advantages and disadvantages over the other and we work with each client to satisfy their requirements and consult on ways of minimizing risk and increasing security. Our facilities allow us to shred material multiple times to fulfill a clients requirements and to ensure the highest level of security. Shredding material multiple times is not required by NAID. We have the capability to shred material to a shred size that is far smaller than the 13/16 inch wide material required by NAID. Tell us the shred size required and we will execute accordingly. We are willing to customize a solution to satisfy requirements. We have dedicated facilities which allow our trucks to drive inside, unload and be cleaned out. We do not unload our trucks nor take our material to a third party recycling center. Our ties to THE SUTTA COMPANY allow us to leverage our long standing relationships with the pulping mills. We use Shredfast mobile trucks which destroy material with the patented pierce and tear technology. More information can be learned by visiting their website: www.shredfast.com

In summary, American Shredding Inc. is a full service organization dedicated to the confidential destruction of documents, media, and outdated products to a variety of clients throughout the western United States. We have established policies and infrastructure designed to minimize security risks to our clients. We strive to bring value and economy of scale to our customers, along with the enhanced security of shredding multiple times. With over thirty years of best-of-breed industry experience, along with AAA certification from NAID, American Shredding offers the State of Nevada a customized shredding program that is unique within the state.

We invite you to visit our facility to see our operations first-hand and learn how to manage risk with a document destruction service. Additionally, we will provide a security analysis of any or all locations to access risk and make recommendations. Visit our website to learn more: www.americanshredding.com

4.1.9

Length of time vendor has been providing services described in this RFP to the public and/or private sector. Please provide a brief description.

American Shredding, a privately-held corporation, has been in the document destruction business since 1975, beginning with the creation of a secure facility in San Jose, CA. This facility was established specifically to handle the destruction material being purged by IBM. Document destruction in this era was a natural outgrowth of the recycling capabilities of The Sutta Company, which shares several of the same owners and operating partners of American Shredding. One of the advantages of doing business with American Shredding is the sharing of inter-company financial resources, personnel, strategies, and equipment. We have over 100 years of combined experience in the document destruction industry.

4.1.10

Financial information and documentation to be included in Part III, Confidential Financial of vendor's response in accordance with **Section 9.5, Part III – Confidential Financial**.

Dun and Bradstreet Number **DUNS: 60 403 6892**
Federal Tax Identification Number **FEIN: 20-3127110**

4.2

SUBCONTRACTOR INFORMATION

Does this proposal include the use of subcontractors? Check the appropriate response in the table below.

Yes		No	No X
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4.3

BUSINESS REFERENCES

4.3.1

Vendors should provide a minimum of three (3) business references from similar projects performed for private, state and/or large local government clients within the last three (3) years.

4.3.2

Vendors must provide the following information for **every** business reference provided by the vendor and/or subcontractor:

The "Company Name" must be the name of the proposing vendor or the vendor's proposed subcontractor.

Reference #:	One (1)		
Company Name:	American Shredding, Inc.		
Identify role company will have for this RFP project (Check appropriate role below):			
X	VENDOR		SUBCONTRACTOR
Project Name:	Document shredding and data destruction		
Primary Contact Information Nevada State Contractors Board			
Name:	Norma S Broyles		
Street Address:	9670 Gateway Drive, Suite 100		
City, State, Zip	Reno, NV 89521		
Phone, including area code:	775-688-1141 x-7811		
Facsimile, including area code:	775-688-1271		
Email address:	<u>nbroyles@nscb.state.nv.us</u>		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Part of Statewide Document Destruction, Shredding and Recycling Services contract of 2008. Ongoing services as needed.		
Original Project/Contract Start Date:	2008		
Original Project/Contract End Date:	Ongoing		
Original Project/Contract Value:	Not available		
Final Project/Contract Date:			
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing		
Was project/contract completed within or under the original budget/cost proposal, and if not, why not?	Rates as bid per contract.		

Reference #:	Two (2)		
Company Name:	American Shredding, Inc.		
Identify role company will have for this RFP project (Check appropriate role below):			
X	VENDOR		SUBCONTRACTOR
Project Name:	Document Shredding		
Primary Contact Information Nevada State Attorney General Office			
Name:	Peggy McCoy		
Street Address:	100 North Carson Street		
City, State, Zip	Carson City, Nevada 89701-4717		
Phone, including area code:	775-684-1183		
Facsimile, including area code:			
Email address:	<u>pmccoy@ag.nv.gov</u>		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Part of Statewide Document Destruction, Shredding and Recycling Services contract of 2008. Ongoing services as needed.		
Original Project/Contract Start Date:	2008		
Original Project/Contract End Date:	2012		
Original Project/Contract Value:	Unknown		
Final Project/Contract Date:			
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing		
Was project/contract completed within or under the original budget/cost proposal, and if not, why not?	Rates per contract bid.		

Reference #:	Three (3)		
Company Name:	American Shredding, Inc.		
Identify role company will have for this RFP project (Check appropriate role below):			
X	VENDOR		SUBCONTRACTOR
Project Name:	Document Shredding		
Primary Contact Information Nevada State Department of Education			
Name:	Julie Kane		
Street Address:	700 E. Fifth Street		
City, State, Zip	Carson City, NV 89701		
Phone, including area code:	775-687-9102		
Facsimile, including area code:			
Email address:	<u>/kane@doe.nv.gov</u>		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Part of Statewide Document Destruction, Shredding and Recycling Services contract of 2008. Ongoing services as needed		
Original Project/Contract Start Date:	2008		
Original Project/Contract End Date:	2012		
Original Project/Contract Value:	Unknown		
Final Project/Contract Date:			
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing		
Was project/contract completed within or under the original budget/cost proposal, and if not, why not?			

Reference #:	Four (4)		
Company Name:	American Shredding, Inc.		
Identify role company will have for this RFP project (Check appropriate role below):			
X	VENDOR		SUBCONTRACTOR
Project Name:	Document Shredding		
Primary Contact Information Nevada State Parole and Probation			
Name:	Rachel McDaniel		
Street Address:	1445 Old Hotsprings Road., Suite 104		
City, State, Zip	Carson City, NV 89706		
Phone, including area code:	702-486-3001		
Facsimile, including area code:			
Email address:	<u>rmcdaniel@dps.state.nv.us</u>		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Part of Statewide Document Destruction, Shredding and Recycling Services contract of 2008. Ongoing services as needed		
Original Project/Contract Start Date:	2008		
Original Project/Contract End Date:	2012		
Original Project/Contract Value:	Unknown		
Final Project/Contract Date:			
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing		
Was project/contract completed within or under the original budget/cost proposal, and if not, why not?			

Reference #:	Five (5)		
Company Name:	American Shredding, Inc.		
Identify role company will have for this RFP project (Check appropriate role below):			
X	VENDOR		SUBCONTRACTOR
Project Name:	Document Shredding		
Primary Contact Information Nevada State Bureau of Healthcare			
Name:	Anitra Fierro		
Street Address:	4150 Technology Way		
City, State, Zip	Carson City, Nevada 89706		
Phone, including area code:	702-486-6515		
Facsimile, including area code:			
Email address:	afierro@health.nv.gov		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Part of Statewide Document Destruction, Shredding and Recycling Services contract of 2008. Ongoing services as needed		
Original Project/Contract Start Date:	2008		
Original Project/Contract End Date:	2012		
Original Project/Contract Value:	Unknown		
Final Project/Contract Date:			
Was project/contract completed in time originally allotted, and if not, why not?	Ongoing		
Was project/contract completed within or under the original budget/cost proposal, and if not, why not?			

Tab VIII
Vendor Staff Resumes

PROPOSED STAFF RESUME--1

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc.	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Steve Sutta	<input checked="" type="checkbox"/> Key Personnel	
Classification:	President	# of Years in Classification:	7
Brief Summary of Experience:	Document shredding experience since 1976; Recycling since 1985		
# of Years with Firm:	Since Inception, and as American Shredding since 2005.		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		July 2005 to present American Shredding, Inc. President 1221 Third Street, Oakland, CA 94607 510-873-8777 Steve@americanshredding.com	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		1985 to present The Sutta Company, Recycling President 1221 Thlr Street Oakland, CA 94607 510-873-8777 steve@sutta.com	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		1974 to 1985 Engineered Waste Control Systems, Inc. West Coast Manager	
EDUCATION			
Description			# of Years Experience
University of Wisconsin			4
Institution Name:	Madison		
City:	Wisconsin		
State:	BA Social Work		
Degree/Achievement:			
Certifications:			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME—2

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc.	
<input checked="" type="checkbox"/> Contractor		<input type="checkbox"/> Subcontractor	
Name:	James Bell	<input checked="" type="checkbox"/> Key Personnel	
Classification:	Vice President	# of Years in Classification:	7
Brief Summary: of Experience:	Document shredding experience since 2005		
# of Years with Firm:	Since Inception In 2005.		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:		July 2005 to present American Shredding, Inc. Vice President 1221 Third Street, Oakland, CA 94607 510-873-8777 james@americanshredding.com Responsible for all issues for this contract	
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
Required Information: MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
Required Information: MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Institution Name: City: State: Degree/Achievement: Certifications:			University of San Francisco San Francisco California BS BioChemistry Identity Theft Risk Management Specialist 4 2007
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

Proposed Staff Resume – 3

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. – Reno Nevada	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Vanessa Bertuca	<input checked="" type="checkbox"/> Key Personnel	
Classification:	Plant Manager	# of Years in Classification:	4
Brief Summary: of Experience:	Document shredding experience since 2008		
# of Years with Firm:	4 years		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:		2008 to present	
MMYYYY to Present:		American Shredding, Inc.	
Vendor Name:		Plant Manager	
Client Name:		630 Splice Islands Drive, Suite D	
Client Contact Name:		Sparks, Nevada 89431	
Client Address, Phone Number, Email:		775-358-3000	
Role in Contract/Project:		vanessahd@sbcglobal.net	
Details and Duration of Contract/Project:		Supervisor for routing and accounting	
Required Information:			
MMYYYY to MMYYYY:			
Vendor Name:			
Client Name:			
Client Contact Name:			
Client Address, Phone Number, Email:			
Role in Contract/Project:			
Details and Duration of Contract/Project:			
Required Information:			
MMYYYY to MMYYYY:			
Vendor Name:			
Client Name:			
Client Contact Name:			
Client Address, Phone Number, Email:			
Role in Contract/Project:			
Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Cerritos Community College,			2
Institution Name:	Cerritos		
City:	California		
State:	BA		
Degree/Achievement:			
Certifications:			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME – 4

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. -- Reno Nevada	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Ryan Rodriguez		<input checked="" type="checkbox"/> Key Personnel
Classification:	Sales & Service Represent.	# of Years in Classification:	3
Brief Summary: of Experience:	Document shredding experience since 2009		
# of Years with Firm:	3 years		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:		2009 to present American Shredding, Inc. Sales & Service Representative 630 Spice Islands Drive, Suite D Sparks, Nevada 89431 775-358-3000 ryrodasi@yahoo.com	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:			
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
University of Reno			4
Reno			
Nevada			
Communications			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME – 5

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. – Reno, Nevada	
<input checked="" type="checkbox"/> Contractor		<input type="checkbox"/> Subcontractor	
Name:	Crystal Killins	<input checked="" type="checkbox"/> Key Personnel	
Classification:	Service Representative	# of Years in Classification:	2
Brief Summary of Experience:	Document shredding experience since 2010		
# of Years with Firm:	2		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:		2002 to present American Shredding, Inc. Service Representative 630 Spice Islands Drive, Suite D Sparks, Nevada 89431 775-358-3000 Service Representative and Shred truck driver	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:			
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Institution Name: City: State: Degree/Achievement: Certifications:			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME – 6

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. – Las Vegas, Nevada	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Christian White		<input checked="" type="checkbox"/> Key Personnel
Classification:	Plant Manager	# of Years In Classification:	1
Brief Summary of Experience:		Document shredding experience since	
# of Years with Firm:	1		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		2011 to present American Shredding, Inc. Supervisor Routing and Accounting and Operations 2313 Mendenhall Drive North Las Vegas, NV 89081 702-595-4676 Christian@americanshredding.com	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		2004 to 2011 Frito Lay Rancho Cucamonga CA, and Casa Grande AZ Sales In CA and Production and Project Managere in AZ 7 years total	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Institution Name: City: State: Degree/Achlevement: Certifications:	University of Redlands	4	
	Redlands		
	California		
	Business and Management		
	BS		
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME – 7

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. – Las Vegas, Nevada	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Diego Garcia		<input checked="" type="checkbox"/> Key Personnel
Classification:	Service Representative	# of Years in Classification:	7
Brief Summary: of Experience:	Document shredding experience since 2005		
# of Years with Firm:	7		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:		2005 to present American Shredding, Inc. Service Representative 2313 Mendenhall Drive North Las Vegas, NV 89081 702-454-2650 Five years experience as shred truck driver and service representative.	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role In Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Institution Name:			
City:			
State:			
Degree/Achievement:			
Certifications:			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			

PROPOSED STAFF RESUME – 8

A resume must be completed for all proposed contractor staff and proposed subcontractor staff.

COMPANY NAME:		American Shredding, Inc. – Las Vegas, Nevada	
<input checked="" type="checkbox"/> Contractor		<input checked="" type="checkbox"/> Subcontractor	
Name:	Adam Eggleston		<input checked="" type="checkbox"/> Key Personnel
Classification:	Service Representative	# of Years in Classification:	5
Brief Summary of Experience:	Document shredding experience since 2004		
# of Years with Firm:	5		
RELEVANT PROFESSIONAL EXPERIENCE			
Required Information:			
MMYYYY to Present: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:		2007 to present American Shredding, Inc. Service Representative 2313 Mendenhall Drive North Las Vegas, NV 89081 702-454-2650 Shred truck driver and service representative	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:		2004 to 2007 Elite Shredding St. George Nevada Shred truck driver and service representative.	
Required Information:			
MMYYYY to MMYYYY: Vendor Name: Client Name: Client Contact Name: Client Address, Phone Number, Email: Role in Contract/Project: Details and Duration of Contract/Project:			
EDUCATION			
Description			# of Years Experience
Institution Name:			
City:			
State:			
Degree/Achievement:			
Certifications:			
REFERENCES			
Minimum of three (3) required, including name, title, organization, phone number, fax number and email address			